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DEC 31 2012

STATE OF SOUTH DAKOTA

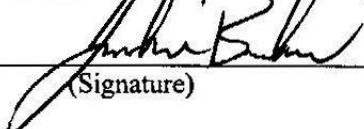
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Avon Clarion		2. DATE 10-1-12
3. FREQUENCY OF ISSUE WEEKLY	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ 38.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 103 N. MAIN AVON, BON HOMME, SD 57315		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) - SAME AS ABOVE -		
6. FULL NAME OF PUBLISHER:		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME BRODSEN INC		COMPLETE MAILING ADDRESS PO Box 345, Avon, SD 57315
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) - NONE -		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	900	900
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	70	70
2. Mail Subscription (Paid and or requested)	690	686
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	760	756
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	—	—
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	62	62
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	822	818
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	78	82
2. Return from News Agents	—	—
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	900	900

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

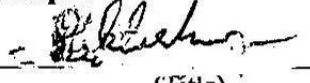
I swear that the statements made by me are true, correct, and complete:


(Signature)

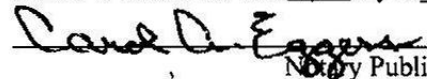
State of South Dakota)

County of **Bon Homme** §

(Seal)

 (PUBLISHER)
(Title)

Sworn to before me this **1** day of **OCT**, 2012


Notary Public

My commission expires: **7-5-2013**